

# SENATE RECORD VOTE ANALYSIS

104th Congress  
2nd Session

Vote No. 120

May 22, 1996, 9:25 a.m.  
Page S-5463 Temp. Record

## BUDGET RESOLUTION/\$18 Billion Tax Hike for More Medicaid Spending

**SUBJECT:** Senate Concurrent Budget Resolution for fiscal years 1997-2002 . . . S. Con. Res. 57. Domenici motion to table the Boxer amendment No. 3982.

### ACTION: MOTION TO TABLE AGREED TO, 55-45

**SYNOPSIS:** As reported, S. Con. Res. 57, the Concurrent Budget Resolution for fiscal years 1997-2002, will balance the Federal budget in fiscal year (FY) 2002 by slowing the overall rate of growth in spending over the next 6 years to below the rate of growth in revenue collections. The rate of growth in entitlements such as Medicare, Medicaid, the Aid to Families with Dependent Children program, and the Earned Income Credit will be slowed. No changes will be made to the Social Security program, the spending for which will grow from \$348 billion in FY 1996 to \$467 billion in FY 2002. Defense spending will be essentially frozen at its present level.

**The Boxer amendment** would increase Medicaid spending by \$18 billion and would offset that cost by increasing tax collections by the same amount. Further, it would express the sense of the Senate: that the provisions in this resolution assume that the entitlement to Medicaid coverage will be preserved for senior citizens, pregnant women, children, and the disabled; that current law will be retained allowing spouses and adult children to keep their assets when putting their spouses and parents into long-term Medicaid nursing home care; that current Federal nursing home standards will be maintained; that States will be protected from fluctuations in Medicaid costs; that States will not be allowed to decrease "their fair share" of Medicaid funding; and that low-income Medicare premiums will still be paid for under Medicaid.

Debate on a first-degree amendment to a budget resolution is limited to 2 hours. Debate was further limited by unanimous consent on the amendment. Following debate, Senator Domenici moved to table the Boxer amendment. Generally, those favoring the motion to table opposed the amendment; those opposing the motion to table favored the amendment.

**Those favoring** the motion to table contended:

(See other side)

YEAS (55)			NAYS (45)		NOT VOTING (0)	
Republicans (53 or 100%)	Democrats (2 or 4%)		Republicans (0 or 0%)	Democrats (45 or 96%)	Republicans (0)	Democrats (0)
Abraham	Helms	Kerrey		Akaka		
Ashcroft	Hutchison	Nunn		Baucus		
Bennett	Inhofe			Biden		
Bond	Jeffords			Bingaman		
Brown	Kassebaum			Boxer		
Burns	Kempthorne			Bradley		
Campbell	Kyl			Breaux		
Chafee	Lott			Bryan		
Coats	Lugar			Bumpers		
Cochran	Mack			Byrd		
Cohen	McCain			Conrad		
Coverdell	McConnell			Daschle		
Craig	Murkowski			Dodd		
D'Amato	Nickles			Dorgan		
DeWine	Pressler			Exon		
Dole	Roth			Feingold		
Domenici	Santorum			Feinstein		
Faircloth	Shelby			Ford		
Frist	Simpson			Glenn		
Gorton	Smith			Graham		
Gramm	Snowe			Harkin		
Grams	Specter			Heflin		
Grassley	Stevens					
Gregg	Thomas					
Hatch	Thompson					
Hatfield	Thurmond					
	Warner					

#### EXPLANATION OF ABSENCE:

- 1—Official Business
- 2—Necessarily Absent
- 3—Illness
- 4—Other

#### SYMBOLS:

- AY—Announced Yea
- AN—Announced Nay
- PY—Paired Yea
- PN—Paired Nay

The Democrats' solution to any failing social program is to spend more money on it instead of addressing its problems. The Boxer amendment is a perfect example of this first principle of Democratic politics. It will raise taxes by \$18 billion to be spent on Medicaid, with the intent of stopping the Republican plan to enact the bipartisan Medicaid reform proposals advanced by 48 Governors. The rhetoric used by our colleagues in this debate has been typically extreme and offensive, and of course has been typically inaccurate. Though Democrats will probably never believe it, the way to reform a program that is growing uncontrollably is not necessarily to spend even more money on it. We reject the notion that the only way to provide needed health care to the indigent is by bankrupting the Nation.

Federal spending on Medicaid has doubled over the last 5 years, and State spending has had a commensurate increase. For States, the rise in costs has been so great that Medicaid spending now consumes an average of 20 percent of a State's budget. Unlike the Federal Government, States balance their budgets. As Medicaid costs have risen, taxes have risen and other spending has been cut. For States, that mainly has meant cuts in spending on education, transportation, law enforcement, and the environment. The present rate of growth, for both the Federal Government and the State governments, is unsustainable.

The Medicaid reforms in this resolution will slow the rate of growth in Medicaid from the present 10 or 11 percent to 6.5 percent per year for the next 6 years. That rate of growth is still twice the rate of inflation. Interestingly, it is only .6 percent less than the 7.1 rate of growth proposed by President Clinton and endorsed by our Democratic colleagues. The difference is negligible. If there were even the slightest shred of truth to the outlandish charges that our proposed level of spending will gut Medicaid, then those same charges would be equally true of the Democrats' proposal.

The Boxer amendment has six sense-of-the-Senate statements on what should be preserved in Medicaid, and during the debate Democrats have charged that none of those items in those statements will be preserved in this resolution. Our colleagues' charge is false. This resolution assumes the adoption of a bipartisan Medicaid reform plan that was developed and endorsed by 48 of this Nation's Governors, and that plan retains the items listed in the Boxer amendment. Our colleagues may not like that the Nation's Governors agreed to a reform plan that does not retain every dot and dash of the current regulations for those items, but the fact remains that the basic services provided by Medicaid will not change.

The big difference between the Clinton proposal that is being backed by Democrats and the Governors proposal that is being backed by Republicans is that the Clinton proposal will not cut back on Federal regulations and micromanagement of Medicaid. Over the past 30 years, each Congress that has come along has added on a new layer of laws to control the program, and each new layer has spawned thousands of new regulations. The result is that in 1996, to spend a Medicaid dollar each State has to comply with 50,000 regulations. The bureaucratic costs of this program are making Federal expenses rise uncontrollably and are also causing considerable hardship for the States. As then-Governor Clinton put it in 1990 in testimony before the House: "Medicaid used to be a program with a lot of options and few mandates. Now it's just the opposite."

The Governors' proposal expands upon existing waiver authority from some Medicaid regulations that States may request. It is extremely difficult to get Federal bureaucrats to grant this authority, and it has been granted to only a few States and with strings attached. However, those States that have received waivers have had impressive results. For example, before Tennessee received its waiver authority, Medicaid costs rose 21 percent in 1986, 16 percent in 1987, 21 percent in 1988, 14 percent in 1989, 20 percent in 1990, 20 percent in 1991, 34 percent in 1992, and 13 percent in 1993. In 1994 its waiver went into effect, and costs rose just 1 percent. Anyone who assumes that it must have cut services to cut the rise in costs so drastically is wrong. In fact, Tennessee went from being among the very worst States in terms of providing services to its eligible population to being the number 1 State in the country.

Our colleagues do not understand that States do not need 50,000 Federal regulations to force them to take good care of their needy citizens. They have a fundamental mistrust of States that makes it impossible for them to look at the results achieved by individual States that have been freed from Federal regulations and to conclude that those results should be emulated across the country. What makes it truly difficult for us to understand our colleagues' mistrust is the fact that most of them have served in State governments, either as legislators or as governors. With absolutely no data and no evidence to back their claims, they insist that the Governors' reform proposal will "amputate" Medicaid and that it will "walk away from children." Such statements are not only offensive, they are also dangerous because they threaten to block enactment of the Governors' proposal.

We do not share our colleagues' mistrust of States. All goodness and wisdom does not emanate from Washington, D.C.; of late, we think most Americans would say that precious little of either can be found in Congress or the White House. The reforms in Medicaid assumed by this resolution should be enacted. The Boxer amendment would block those reforms, and would instead raise taxes by \$18 billion in order to spend more money on this program. We strongly urge our colleagues to table the Boxer amendment.

**Those opposing** the motion to table contended:

The Boxer amendment would restore \$18 billion in excessive cuts made by the Republican budget resolution in Medicaid, and it would offset the cost of that restoration by closing \$18 billion in corporate tax loopholes. Medicaid is an American success story. First, it provides care for 2 million senior citizens in nursing homes. Without that care, those senior citizens would have no way of paying for medical care. Second, there are 18 million children who depend on Medicaid. Third, there are 6 million disabled

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Americans who rely on Medicaid. Fourth, up to 1 million pregnant women per year are on Medicaid. This program provides needed medical care to the neediest Americans who have no other way of receiving treatment.

Before Medicaid existed many poorer Americans went without needed treatment. The infant mortality rate in many Southern States was higher than the rate in undeveloped nations. Senior citizens in nursing homes were abused by callous and sadistic attendants. Disease was rampant, immunizations were infrequent, and when operations were needed death was often the only option because no funding was available. States provided some care and oversight, but it was inadequate. The creation of Medicaid brought a degree of uniformity and a safety net.

Medicaid now has financial problems. The solution advanced by our Republican colleagues is to turn the program over to the States by endorsing the Governors' Medicaid proposal. That proposal provides nominal assurances that States will continue to provide the same level of Medicaid services that are now mandated and strictly enforced through Federal regulations, but it does not give any guarantee that States will stick by those assurances. In future years, if they get in financial difficulties, we do not trust the States to continue spending on Medicaid. Already the Governors' proposal is inadequate. For example, it will continue to give Medicaid as an entitlement to children under the age of 13, but the entitlement for children between 13 and 18 years of age will be ended.

The Republican proposal will amputate Federal control over this program. It asks us to simply walk away from needy children, the disabled, senior citizens, and pregnant women. We will not. We agree with former President Reagan, who once said that the entire Medicaid program should be federalized. We do not need poor populations shuffling from one State to another looking for the best Medicaid benefits, and we do not want individual States ending up with Medicaid populations that are too large for them to handle. The Republican proposal is a step in the wrong direction. We need to increase Federal control over the Medicaid program. The Boxer amendment would restore \$18 billion to the program to move it in the direction of greater Federal control. We urge our colleagues to support this amendment.